

SENATOR NORM COLEMAN: A VISION FOR OUR HEALTH CARE FUTURE

As I travel across our state, one thing is abundantly clear – Minnesotans, like most Americans, are more concerned about health care than just about any other issue. Many of you are worried: Worried about the escalating cost of insurance, whether your kids will be covered, whether you will lose your health plan at work. I share many of your frustrations and understand your fears. That's why I am committed to the following principles that provide the choices we all want, the quality we need, and the health care security the American people deserve.

HEALTH CARE DECISIONS SHOULD NOT BE MADE BY WASHINGTON BUREAUCRATS

- The government should help ensure access, affordability, reliability, and quality, while keeping health care decisions where they belong -- in the hands of you and your doctor.
- Health reform should preserve a patient's ability to see the doctor of their choice.
- Health reform should not include a one-size-fits-all approach. People should have access to a variety of health insurance options, and the ability to make informed choices.

WHEN EVERYONE CONTRIBUTES, EVERYONE BENEFITS

- Health insurance should be like car insurance -- we should all share responsibility for our nation's health care spending.
- Whether we like it or not, we are all paying for the 47 million uninsured -- we spend about \$40 billion of your taxpayer dollars on uncompensated care each year -- this money could be better spent trying to reduce errors with electronic medical records or offering incentive payments for providing high-quality care.

ENSURING ACCESS AND SECURITY

- Every American should have access to an affordable health insurance plan, and people should not have to worry about losing health insurance just because they get sick.
- Workers should be able to leave their employer, start a new business, change jobs or spend more time at home with their family without risking their health care coverage.
- Tax reform should level the playing field, so that people who don't have access to employer-based coverage receive equal tax benefits when purchasing health insurance.
- Insurance reform should reign in the high-cost of premiums, so people who need care the most aren't denied access to health insurance.

PROMOTING QUALITY AND PREVENTION

- Rather than just treating people when they get sick, we should put more money into preventive medicine and wellness programs.
- We should provide patients with accurate data on cost and quality, so they can make informed decisions about how to spend their health care dollars.
- We should change how the federal government pays for health care to encourage high-quality, low-cost care.

Did you know . . .

- Forty-seven million Americans lack health insurance, or about 16 percent of the population.
- Minnesota has the lowest rate of uninsured residents in the country at approximately 420,000 or 8 percent of the population.
- America spends more than \$2 trillion on health care each year, or about 16 percent of GDP -- this is more than twice what many developed countries spend.
- More than 80 percent of the uninsured make less than 300 percent of the federal poverty level, or about \$62,000 for a family of four. And almost 70 percent of the uninsured live in a home with at least one full-time worker.
- About 60 percent of people get their insurance through an employer in 2007, down from 69 percent in 2000 -- but only 6 percent purchase coverage in the private, non-group market.
- Premiums for employer-sponsored health insurance rose an average of 6.1 percent in 2007 -- about twice the rate of inflation.
- According to the Kaiser Family Foundation, employer-based coverage in 2007 costs about \$4,479 for an individual and about \$12,106 for a family.
- According to America's Health Insurance Plans (AHIP), private, non-group coverage in 2007 is available for about \$2,800 for an individual and \$5,500 for family coverage each year.
- Approximately 25 percent of the uninsured are eligible for Medicaid, but not enrolled.
- Nearly one million Canadian patients are on waiting lists for medical treatment, and research has shown they wait an average of 17.8 weeks to see a specialist.
- Prevention and early detection could save our health system over \$1 trillion annually.
- Reducing obesity alone could save our health care system more than \$60 billion in treatment costs and improve the nation's economic output by \$254 billion.
- Widespread adoption of Health Information Technology could save \$162 billion a year.